NEVADA FINANCIAL DISCLOSURE STATEMENT

(Attach additional sheets if necessary.)

NAME LENGTH OF RESIDENCE IN NEVADA MAILING ADDRESS LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO CITY, STATE, ZIP VOTE [per NRS 281.571(1)(a)] TELEPHONE (775 ddoctch a sbe global. List all public offices for which this financial disclosure statement is required [NRS 281.571, Subsection 1(g)]: **APPOINTMENT ANNUAL** CANDIDATE all elected and (no later than to fill unexpired term the 10th day of an elected or appointed public after the last day appointed public officers to qualify as a officer (no later than Jan. 15 (within 30 days) candidate) each year) NRS 281.559(1)(a) Elected (E) or Annual NRS Term or **Public Office** 281.559(1)(b) 281.561(1)(a) Appointed (A) Compensation Date Appointed 281.561(1)(b) RENO CITY COUNCIL List all general sources of income for you and members of your household over 18 years of age [NRS 281.571, Subsection 1(b)]: Household Self Member LENGUE PHYSICIANS List each creditor to whom you or a member of your household owes \$5,000 or more [except (1) debt secured by mortgage or deed of trust on real property which is not required to be listed below, and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281.571, Subsection 1(d)]: 02 Household Self Member $\widehat{\Omega}$

firm, business, trust joi nvolved as a trustee, b a class of stock or secu	nt venture, syndicate beneficiary of a trust urity representing 1%	te, corporation or ass , director, officer, owr	ed for economic gain, in sociation) with which your in whole or in part, lied outstanding stock or se	u or a member of you	our house tner, or h	ehold is older of
NRS 281.571, Subsection	1(f)]:	4			Self	Househol Member
				-		
List appoilée lecation ex	nd mortioular use of				· !!	. ,
List specific location al your household has a l state or an adjacent sta	egal or beneficial in	terest; (2) the fair ma section 1(c)]:	than personal residence rket value of which is \$2	ce): (1) in which you 2,500 or more; and (3 Particular Use	or a me 3) locate	mber of d in this
	N A					
during the preceding ta consanguinity or affinit occasion if the donor d	axable year [except y; and (2) ceremonions oes not have a subs	a gift received from al gifts received for a	cess of an aggregate va om a person who is rela birthday, wedding, ann r legislative, administrat	ated to you within the iversary, holiday or o	e third de other cer	egree of
NRS 281.571, Subsection	1(e) <u>]</u> :	Donor			Value of	Gift
	7	A		\$\$\$\$\$\$\$\$\$		
THE INFORMATION I	HAVE PROVIDED I	HEREIN IS ACCURA	TE AND COMPLETE,			
Date: 1 10 C	c ر,	Signature.	e) in (9	£ 100	Q.	
	Appointed Public Officers Nevada Commission on Ethics 3476 Executive Pointe Way, S Carson City, Nevada 89706 775.687.5469 • 775.687.1278	uite 10	n with: Elected Public Officers and Ca Nevada Secretary of State, Ele 101 North Carson Street, Suite Carson City, NV 99701 775.684.5705 • 775.684.5718	ections Division 3		

Revised 8/23/2005